



COLLIN COUNTY TEEN COURT

PARENT / GUARDIAN SURVEY

You may choose to complete this survey anonymously; however, it is helpful for you to provide the cause number of your child so that we can attribute your comments to the specific experience of your child's case. **THIS SURVEY MUST BE COMPLETED AND TURNED IN BEFORE YOUR CHILD'S CASE IS DISMISSED.**

You child's name: _____ Cause Number: _____

Date your child's case was heard by Teen Court: _____

Was the time of the hearing convenient? _____

What was your child's sentence? _____

Do you think the sentence was (circle one): TOO MUCH APPROPRIATE TOO LITTLE

Do you think the time to complete the sentence was (circle one): TOO LONG FAIR TOO SHORT

Were the directions after the hearing clear and understandable? _____

As applicable, on a scale of 1-10 (10 being the highest), indicate your rating of the following parties:

Your child's teen attorney? _____ The jury / tribunal which decided the case? _____

The teen prosecuting attorney? _____ The Teen Court Coordinator? _____

Do you think the Teen Court program was beneficial to your child? Please explain:

What could be done to improve the Teen Court program / experience? Please explain:

Do you feel this program was more effective than just paying a fine?

Would you recommend the program to other parents whose children are eligible for Teen Court?

Please return this survey as soon as possible to "TEEN COURT" at 200 S. McDonald St., Ste. 110, McKinney, Texas, 75069, or you may fax it to (972) 548-4188. Thank you for participating in Teen Court.